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\*BIBDATASHEET\*

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CONFIRMATION NO. 19

Bib Data Sheet

SERIAL NUMBER 09/584,516	FILING DATE 05/31/2000  RULE	CLASS 370	GROUP ART UNIT 2666	ATTORNEY DOKKE NO. 00,011
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## APPLICANTS

David A. Grabelsky, Skokie, IL;

Michael S. Borella, Naperville, IL;

John Poplett, River Forest, IL; Richard J. Dynarski, Freehold, NJ;

SH YES  
\*\* CONTINUING DATA \*\*\*\*\*

This application is a CIP of 09/035,600 03/05/1998 PAT 6,353,614

SH NONE  
\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 07/26/2000

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Examiner's Signature <u>SH</u> Initials	IL	12	33	2

## ADDRESS

McDONNELL BOEHNNEN HULBERT &amp; BERGHOFF

300 South Wacker Drive

Chicago, IL

60606

## TITLE

Method for address mapping in a network access system and a network access device for use therewith

FILING FEE  RECEIVED 1054	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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Bib Data Sheet

CONFIRMATION NO. 1984

<b>SERIAL NUMBER</b> 09/584,516	<b>FILING DATE</b> 05/31/2000 <b>RULE</b>	<b>CLASS</b> 709	<b>GROUP ART UNIT</b> 2755	<b>ATTORNEY DOCKET NO.</b> 00,011
<b>APPLICANTS</b> David A. Grabelsky, Skokie, IL; Michael S. Borella, Naperville, IL; John Poplett, River Forest, IL; Richard J. Dynarski, Freehold, NJ;				
<b>** CONTINUING DATA *****</b> THIS APPLICATION IS A CIP OF 09/035,600 03/05/1998				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE</b> <b>GRANTED ** 07/26/2000</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> IL	<b>SHEETS DRAWING</b> 12	<b>TOTAL CLAIMS</b> 33
<b>INDEPENDENT CLAIMS</b> 2				
<b>ADDRESS</b> McDONNELL BOEHNNEN HULBERT & BERGHOFF 300 South Wacker Drive Chicago ,IL 60606				
<b>TITLE</b> Method for address mapping in a network access system and a network access device for use therewith				
<b>FILING FEE RECEIVED</b> 1054	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	